ALEXION PHARMACEUTICALS INC

Form 4 July 27, 2007

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

Check this box

Number: 3235-0287

Synings: January 31,

2005

if no longer subject to Section 16. Form 4 or IP OF Expires: Sanda Expires:

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

burden hours per response... 0.5

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obligations
may continue.
See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and A	. Issuer Name an mbol LEXION PHA C [ALXN]			Issuer	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) C/O ALEX PHARMAC KNOTTER	ION CEUTICALS INC	(Ma 07	Date of Earliest T onth/Day/Year) /25/2007	ransaction		Director 10% Owner X Officer (give title Other (specify below) below) EVP & Head of Research				
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year) CHESHIRE, CT 06410					I	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non-	Derivative :	Securities A	cquired, Disposed	of, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code	or(A) or Dis (Instr. 3, 4	ies Acquired sposed of (E 4 and 5) (A) or (D) Pri	P) Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock, par value \$.0001 per share	07/25/2007		M	8,750	A \$9	33,764	D			
Common Stock, par value \$.0001 per share	07/25/2007		M	8,750	A \$9	5 42,514	D			

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Common Stock, par value \$.0001 per share	07/25/2007	M	5,249	A	\$ 47,763	D
Common Stock, par value \$.0001 per share	07/25/2007	M	2,251	A	\$ 10.74 45,512	D
Common Stock, par value \$.0001 per share	07/25/2007	S	4,516 (1)	D	\$ 56.9 40,996	D
Common Stock, par value \$.0001 per share	07/25/2007	S	20,484 (1)	D	\$ 56.5 20,512	D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to Purchase Common Stock	\$ 9	07/25/2007		M		8,750	12/04/1998	12/04/2008	Common Stock, par value \$.0001 per share	8,750
	\$ 9.5	07/25/2007		M		8,750	07/27/1999	07/27/2009		8,750

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Option to Purchase Common Stock							Common Stock, par value \$.0001 per share	
Option to Purchase Common Stock	\$ 10.74	07/25/2007	M	5,249	03/04/2003	03/04/2013	Common Stock, par value \$.0001 per share	5,249
Option to Purchase Common Stock	\$ 10.74	07/25/2007	M	2,251	03/04/2003	03/04/2013	Common Stock, par value \$.0001 per share	2,251

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

SQUINTO STEPHEN P C/O ALEXION PHARMACEUTICALS INC 352 KNOTTER DRIVE CHESHIRE, CT 06410

EVP & Head of Research

Signatures

Reporting Person

/s/ Stephen
Squinto

**Signature of Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) The sales reported by this Form 4 are made pursuant to the terms of a Sales Plan designed to meet the requirements of Rule 10b5-1 (c) (1) of The Securities Exchange Act.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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